03/20/2006 13:44

Image# 26920021370

FEC FORM 3X

Only

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) 655 Beach Street ADDRESS (number and street) Check if different than previously San Francisco CA 94109 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. CITY A ZIPCODE A IS THIS **AMENDED** NEW C00196246 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 0 1 2006 0 1 3 1 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Benjamin Bank Type or Print Name of Treasurer Electronically Filed by Benjamin Bank 03 16 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003)

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) [®] D D 0 1 0 1 2006 0 1 3 1 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 535866.50 [°]2006 January 1 (b) Cash on Hand at 535866.50 Begining of Reporting Period 52431.51 52431.51 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 588298.01 588298.01 6(a) and 6(c) for Column B) 7352.54 7352.54 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 580945.47 580945.47 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E street, NW

Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

American Academy of Ophthalmology Inc Political Committee (OPHTHPAC)

м м 0 1 0 1 М М 0 1 3^D1 2006 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 45425.00 45425.00 (i) Itemized (use Schedule A) 6447.50 6447.50 (ii) Unitemized (iii) TOTAL (add 51872.50 51872.50 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii) (b) and (c)) (Carry

Totals to Line 33, page 5)	51872.50	51872.50
12. Transfers From Affiliated/Other Party Committees	0.00	0.00

13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00

15. Offsets to Operating Experiorities		
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
(Oarry Totals to Line 07, page 3)		

16.	Refunds of Contributions Made		
	to Federal candidates and Other Political Committees	0.00	0.00

17. Otner Federal Receipts	550.04	=== 0.1
(Dividends, Interest, etc.)	559.01	559.01
(=		

18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00

(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
---	------	------

19. Total Receipts (add Lines TT(d),	E0404 E4	F0404 F4
12, 13, 14, 15, 16, 17, and 18(c))	52431.51	52431.51

20 Total Fadaral Bassints		
20. Total Federal Receipts	E0404 E4	E0404 E4
(subtract Line 18(c) from Line 19)	52431.51	52431.51
(Subtract Line To(c) from Line To)		

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	852.54	852.54
	(c) Total Operating Expenditures		
_	(add 21(a)(i), (a)(ii) and (b))	852.54	852.54
2.	Transfers to Affiliated/Other Party Committees	0.00	0.00
3.	Contributions to		
	Federal Candidates/Committeesand Other Political Committees	6500.00	6500.00
4.	Independent Expenditure (use Schedule E)	0.00	0.00
5.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d))	0.00	0.00
	(use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
7.	Loans Made	0.00	0.00
8.	Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	0.00
n	Federal Election Activity (2 U.S.C 431(20))		
٥.	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1	Total Disbursements (add Lines 21(c), 22,		
••	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	7352.54	7352.54
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)		
	from Line 31)	7352.54	7352.54

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Total Contributions (other than loans) from Line 11(d), page 3)	51872.50	51872.50
	Total Contribution Refunds (from Line 28(d))	0.00	0.00
5.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	51872.50	51872.50
86.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	852.54	852.54
	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
	Net Operating Expenditures (subtract Line 37 from Line 36)	852.54	852.54

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 38
	ITEMIZED RECEIPTS		or each category of the	(check only one)
•	EIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	_
A.				Date of Receipt
	Mailing Address 3267 Westbourne Drive			01 05 7 2006
	City	State	Zip Code	Transaction ID: 3DYSBR341385
	Cincinnati	ОН	45248-5130	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			365.00
	Name of Employer self	Occupation Ophthalm		Batch Tool - PAC
	Receipt For:		Year-to-Date ▼	
	Primary General		205.00	1
	Other (specify) ▼	0 0	365.00	
В.	Full Name (Last, First, Middle Initial) William Argus			Date of Receipt
	Mailing Address 7030 Pointe Inverness W	'ay		M M / D D / Y Y Y
	Suite 240			01 24 2006
	City	State	Zip Code	Transaction ID: CJV477787849
	Fort Wayne	IN	46804-7930	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	 1	Batch Tool - PAC
	self	Ophthalm		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify) ▼	0 0	300.00	
C.	Full Name (Last, First, Middle Initial) Vasant Balar			Date of Receipt
	Mailing Address 224 E Bearss Avenue			01 05 7 2006
	City	State	Zip Code	Transaction ID: 3DYSBR260265
	Tampa	FL	33613-1625	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer self	Occupation Ophthalm		Batch Tool - PAC
			Year-to-Date ▼	
	Primary General		000.00	1
	Other (specify) ▼	0 0	300.00	
S	UBTOTAL of Receipts This Page (optional)			1165.00
\vdash				-
_	OTAL This Period (last page this line number on	v)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7/38
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one)	
			X 11a 11b 11c 12 13 14 15 16 17	
An	y information copied from such Reports and St	atements may	not be sold or used by any perso	
or	y information copied from such Reports and Si for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American Academy of Ophthalmology	Inc Political	Committee (OPHTHPAC)	
A.	Full Name (Last, First, Middle Initial) Laurie Barber			Date of Receipt
	Mailing Address Uams Department Oph 4301 W Markham Slot			01 18 2006
	City	State	Zip Code	Transaction ID: CJUW1T316359
	Little Rock	AR	72205	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2500.00
	Name of Employer self	Occupation		Batch Tool - PAC
		Ophthaln		_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		2500.00	
				1
В.	Full Name (Last, First, Middle Initial) Joseph Barron			Date of Receipt
	Mailing Address 3101 Mercedes Drive			01 09 2006
	City	State	Zip Code	Transaction ID: 3DYXP6052543
	Monroe	LA	71201-5153	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer	Occupation	n	Batch Tool - PAC
	self	Ophthaln	nologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	' '	365.00	
	Other (specify) ▼	0 0		
C.	Full Name (Last, First, Middle Initial) Wendall Bauman			Date of Receipt
	Mailing Address 137 Primrose Place			01 01 2006
	City	State	Zip Code	Transaction ID: 1TV21F8ENYD3
	San Antonio	TX	78209-3832	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Occupation Self Ophthal		n nologist	PACWEB GENERATED CONTRIBU- TION
			e Year-to-Date ▼	
Primary General			500.00	
	Other (specify) ▼	0 0	500.00	
	IJPTOTAL of December This Daws (action 1)			3365.00
S	UBTOTAL of Receipts This Page (optional)		······	
T	OTAL This Period (last page this line number of	only))	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 38
ITEMIZED RECEIPTS		or each category of the	(check only one)	
•			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	ny information copied from such Reports and Sta	atements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	dress of any political committee to	solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	Ina Palitiaal	Committee (ODUTUDAC)	
	American Academy of Ophthalmology	inc Fondica	Committee (OFHTHFAC)	
_	Full Name (Last, First, Middle Initial)			Data of Baselet
Α.	Brian Berger Mailing Address 3705 Medical Parkway			Date of Receipt
	Suite 410			01 05 2006
	City	State	Zip Code	Transaction ID: 3DYSBR171601
	Austin	TX	78705-1019	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self	Occupatio		Batch Tool - PAC
		Ophthaln		4
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
	Other (specify) ▼		500.00	
_				•
В.				Date of Receipt
	Mailing Address 608 Stanton L Young B Dean A McGee Eye Ins			01 18 2006
	City	State	Zip Code	Transaction ID: CJUW1T232879
	Oklahoma City	OK	73104-5014	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer OUHSC	Occupation	n	Batch Tool - PAC
	OUHSC	Ophthaln		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	500.00	
	calci (cpccii), •	0 0		1
_	Full Name (Last, First, Middle Initial)			Date of Descint
C.	Michael Brennan Mailing Address 1214 Vaughn Road			Date of Receipt
				01 18 2006
	City	State	Zip Code	Transaction ID: CJUW1T685410
	Burlington	NC	27217-2863	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		365.00
	·			Batch Tool - PAC
Name of Employer Occupation Self Ophthali Receipt For: Aggregat				Jacon 1961 1716
			e Year-to-Date V	-
	Primary General			1
	Other (specify)		365.00	
Г				
s	UBTOTAL of Receipts This Page (optional)			1365.00
_	OTAL This Period (last page this line number of	nnly)		
	Title I this i chod (last page this line hulliber t	···· y / ······	······································	

SCHEDULE A (FEC Form 3X)		Lisa sanarata sahadula(a)	FOR LINE NUMBER: PAGE 9/38
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
Any information copied from such Reports and St	atements may	y not be sold or used by any perso	n for the purpose of soliciting contributions
or for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	Inc Politica	I Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) A. William Cain			Date of Receipt
Mailing Address 1920 Pickens Street			01 03 7 2006
City <u>Columbia</u>	State SC	Zip Code 29201-2632	Transaction ID: 3DYPWY148338 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		365.00
Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) 6. Charles Colombo			Date of Receipt
Mailing Address 1701 South Boulevard Suite 180			01 10 / Y Y Y Y Y Y
City Rochester Hills	State MI	Zip Code 48307-6122	Transaction ID: 3DYYWA324761
FEC ID number of contributing federal political committee.	C	46307-0122	Amount of Each Receipt this Period 250.00
Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) 5. Frank Cotter			Date of Receipt
Mailing Address PO Box 1789 Vistar Eye Center			01 30 / Y Y Y Y Y
City <u>Roanoke</u>	State VA	Zip Code 24008-1789	Transaction ID: CJVBIN381783
FEC ID number of contributing federal political committee.	C	24000-1709	Amount of Each Receipt this Period 500.00
Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			1115.00
TOTAL This Period (last page this line number of	only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 10/38
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	
<u> </u>	NAME OF COMMITTEE (In Full)		areas or arry pointed committee to	
\rangle	American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Martha Damaske Snearly			Date of Receipt
	Mailing Address 8055 Twin Oaks Drive			01 24 7 2006
	City	State	Zip Code	Transaction ID: CJV477463203
	Broadview Heights	OH	44147-1035	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		365.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:		Year-to-Date ▼	-
	Primary General Other (specify) ▼	- igg ogul	365.00	
 3.	Full Name (Last, First, Middle Initial) Edgar Dapremont			Date of Receipt
	Mailing Address PO Box 6545			0 1 2 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 63752-16140383481979
	Gulfport	MS	39506-6545	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer	Occupation	n	PAC 3rd of 4
	self	Ophthaln		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
).	Full Name (Last, First, Middle Initial) Jonathan Davidorf			Date of Receipt
	Mailing Address 7320 Woodlake Avenue Suite 190			01 30 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: CJVBIN520222
	West Hills	CA	91307-1468	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
s	UBTOTAL of Receipts This Page (optional)			1115.00
			·	
T	OTAL This Period (last page this line number onl	ly)	>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	Check only one
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology			Solicit contributions from Such committee.
Full Name (Last, First, Middle Initial) Patrick Dennis Mailing Address 116-B Ashley Avenue City Charleston FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary Other (specify)	State SC C Occupation Ophthalm Aggregate		Date of Receipt M M D D 2 0 0 6
Full Name (Last, First, Middle Initial) Louise Doyle Mailing Address 2020 Kenny Road	0 0	0 0 0 0 0 0 0	Date of Receipt
City Columbus FEC ID number of contributing federal political committee.	State OH	Zip Code 43221-3502	0 1 1 8 2 0 0 6 Transaction ID: CJUW8T515756 Amount of Each Receipt this Period 365.00
Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthalm Aggregate		Batch Tool - PAC
Full Name (Last, First, Middle Initial) Daniel Drysdale Mailing Address 3645 S Main Street			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Blacksburg FEC ID number of contributing federal political committee.	State VA	Zip Code 24060-7018	Transaction ID: 3DYSBR331736 Amount of Each Receipt this Period 250.00
Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupatio Ophthaln Aggregate		Batch Tool - PAC
SUBTOTAL of Receipts This Page (optional)			865.00
TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12/38
ITEMIZED RECEIPTS		or each category of the	(check only one)
· · · · · · · · · · · · · · · · · · ·		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Any information copied from such Reports and St	atements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	Inc Politica	Committee (OPHTHPAC)	
/ rancolour loudent, or opinion annotegy			
Full Name (Last, First, Middle Initial) 1. Paul Fecko			Date of Receipt
Mailing Address 195 W Brown Street			M M / D D / Y Y Y Y
City	State	Zip Code	0 1 0 5 2 0 0 6 Transaction ID: 3DYSBR197857
Birmingham	MI	48009-6018	Amount of Each Receipt this Period
FEC ID number of contributing	C		500.00
federal political committee.			
Name of Employer self	Occupatio		Batch Tool - PAC
	Ophthair	nologist e Year-to-Date ▼	_
Receipt For: Primary General	Aggregate		1
Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial)			-
John Frangie			Date of Receipt
Mailing Address 22 University Drive Pioneer Valley Ophthal	mic Consul	ta	01 30 Y Y Y Y Y Y
City City	State	Zip Code	Transaction ID: CJVBIN814116
Amherst	MA	01002-2243	Amount of Each Receipt this Period
FEC ID number of contributing	C		1000.00
federal political committee.			Batch Tool - PAC
Name of Employer self	Occupatio Ophthalr		Batch 1001-1 AO
Receipt For:		e Year-to-Date V	-
Primary General	33 3		1
☐ Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial)			+
Geoffrey Garrett	a.d. 1.1		Date of Receipt
Mailing Address 1455 E Bert Kouns Indu Highland Clinic	ustriai Loop 		01 30 4 4 9 9
City	State	Zip Code	Transaction ID: CJVBIN589471
Shreveport	LA	71105-5634	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		365.00
	Occupatio	n	Batch Tool - PAC
colf		nologist	
Receipt For:	_ 	e Year-to-Date ▼	7
Primary General Other (specify) ▼	1	365.00	
Outof (specify) \		0 0 0 0 0 0 0 0	
			1865.00
SUBTOTAL of Receipts This Page (optional)		<u> </u>	1003.00
TOTAL This Period (last page this line number of	only))	

S	CHEDULE A (FEC Form 3X)		Llea coparata cabadula(c)	FOR LINE NUMBER: PAGE 13/38
	ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
•••	LIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
Δ.	information and them and the			13 14 15 16 17
or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	dress of any political committee to	on for the purpose of soliciting contributions as solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American Academy of Ophthalmology I	nc Political	Committee (OPHTHPAC)	
A.	Full Name (Last, First, Middle Initial) John Geanon			Date of Receipt
	Mailing Address 1025 Regent Street			01 05 2006
	City	State	Zip Code	Transaction ID: 3DYSBR030082
	Madison	WI	53715-1248	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer self	Occupation Ophthalm		Batch Tool - PAC
	Receipt For:	<u> </u>	Year-to-Date V	
	Primary General			7
	Other (specify) •		250.00	
В.	Full Name (Last, First, Middle Initial) Joseph Greco			Date of Receipt
	Mailing Address 11 Church Street Unit 706			01 05 7 9 9 9
	City	State	Zip Code	Transaction ID: 3DYSBR494874
	Salem	MA	01970-3766	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer self	Occupation Ophthalm		Batch Tool - PAC
	Receipt For:	<u> </u>	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	300.00	
<u> </u>	Full Name (Last, First, Middle Initial) Mark Greenwald			Date of Receipt
•	Mailing Address 1119 E 53rd Street			0 1 0 5 2 0 0 6
	City	State	Zip Code	Transaction ID: 3DYSBR132361
	Chicago	<u>IL</u>	60615-4410	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer self	Occupation Ophthalm		Batch Tool - PAC
		•	Variable Date =	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
s	Primary General Other (specify)	0 0	250.00	800.00
s	Primary General	0 0	250.00	800.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 38 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	
A.	Full Name (Last, First, Middle Initial) Erich Groos Mailing Address 2011 Murphy Avenue Sui Cornea Consultants of Na City Nashville FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	ashville State TN C Occupation Ophthaln		Date of Receipt M
3.	Michael Hettinger Mailing Address 7504 Antioch Road City Overland Park FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify) ▼	State KS C Occupation Ophthaln Aggregate		Date of Receipt M M D D 2 0 0 6 Transaction ID: CJVBIN355928 Amount of Each Receipt this Period 500.00 Batch Tool - PAC
C.	Full Name (Last, First, Middle Initial) Kenneth Hogrefe Mailing Address 130 Center Way Guthrie Med Grove City Corning FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State NY C Occupation Ophthaln Aggregate		Date of Receipt M M J D D J Z D D 6 Transaction ID: 3DYYWA596883 Amount of Each Receipt this Period 500.00 Batch Tool - PAC
s	UBTOTAL of Receipts This Page (optional)			1250.00
Т	OTAL This Period (last page this line number onl	v))	

<u> </u>				FOR LINE NUMBER: PAGE 15/38
<u>ا</u> ر	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
۸				
or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
<u>. </u>		arro arro ac	areas or any pointed committee to	Concil Continuations from Coord Committee.
/	NAME OF COMMITTEE (In Full)	D !!!!	(ODLITUDAO)	
Ι	American Academy of Ophthalmology I	nc Politica	Committee (OPHTHPAC)	
_	F. H. N (Land. Effect. NA'-lalle Lett's)			
۸	Full Name (Last, First, Middle Initial) Cleve Howard			Date of Receipt
٦.		11		⊣
	Mailing Address 9035 Southwest 72nd S Suite 203	treet		01 23 2006
	City	State	Zip Code	Transaction ID: CJV2UG067156
	Miami	FL	•	
		1 L	33173-3441	Amount of Each Receipt this Period
	FEC ID number of contributing	C		365.00
	federal political committee.			
	Name of Employer	Occupatio	 n	Batch Tool - PAC
	self	Ophthair		
	Receipt For:	<u> </u>	Year-to-Date ▼	_
	Primary General	Aggregate	Teal to Bate V	
	Other (specify)		365.00	
	Ciriei (specify) 🔻			1
	F. II N. L (L. a.) First NAI-III (L. I.)			
2	Full Name (Last, First, Middle Initial) Mark Hughes			Date of Receipt
٠.	Mailing Address 50 Staniford Street			─
	Suite 600			01 15 2006
	City	State	Zip Code	Transaction ID: 63219-09878176450729
			•	
	Boston	MA	02114-2517	Amount of Each Receipt this Period
	FEC ID number of contributing	С		1250.00
	federal political committee.			
	Name of Employer	Occupatio	n	PAC 2nd of 4
	self	Cocapatio		
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General	Aggregate	Teal to Bate ¥	
	Other (specify)		1250.00	
	Cirici (Specify)	0 0		
	Full Name (Last First Middle Initial)			
	Full Name (Last, First, Middle Initial) Jerry Hunsaker			Date of Receipt
	Mailing Address 4707 Everhart Road			M M / D D / Y Y Y Y
	Suite 106			01 05 2006
	City	State	Zip Code	Transaction ID: 3DYSBR653267
	Corpus Christi	TX	78411-2736	Amount of Each Receipt this Period
	•	1//	70411 2730	Amount of Lacif Neceipt this Feriou
	FEC ID number of contributing federal political committee.	C		1000.00
	rederal political committee.			
	Name of Employer self	Occupatio	n	Batch Tool - PAC
	self	Ophthalr		
	Receipt For:		e Year-to-Date ▼	
	Primary General	33 -3		1
	Other (specify) ▼		1000.00	
		0 0	1 1 1 1 1 1 1	1
_	IIDTOTAL of Descripto This Descriptoral		_	2615.00
5	UBTOTAL of Receipts This Page (optional)		······	
_				
T	OTAL This Period (last page this line number o	nıy)	.	

S	CHEDULE A (FEC Form 3X)		l la a agravata a abadula(a)	FOR LINE NUMBER: PAGE 16/38
TEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
•	EMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
^ -	information and formation Broads and Old			13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any perso dress of any political committee to	solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American Academy of Ophthalmology Ir	nc Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Gordon Johns			Date of Receipt
	Mailing Address 2517 Northeast Kresky A Pacific Cataract and Las	Avenue er Inst		01 09 7 2006
	City	State	Zip Code	Transaction ID: 3DYXN5672436
	Chehalis	WA	98532-2409	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:		Year-to-Date ▼	_
	Primary General Other (specify) ▼		1000.00	
	care (epoon), •	0 0		
3.	Full Name (Last, First, Middle Initial) Randolph Johnston			Date of Receipt
	Mailing Address 1300 E 20th Street Cheyenne Eye Clinic	01 18 2006		
	City	State	Zip Code	Transaction ID: CJUW1T598943
	Cheyenne	WY	82001-4021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2500.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:		Year-to-Date ▼	
	Primary General	1 1	2500.00	
	Other (specify) ▼	0 0	2500.00	
Э.	Full Name (Last, First, Middle Initial) Kenneth Kato			Date of Receipt
	Mailing Address 2020 Fleischmann Road			01 16 7 2006
	City	State	Zip Code	Transaction ID: 1X3Q49UE1KUE2
	Tallahassee	<u>FL</u>	32308-4599	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer self	Occupation Ophthaln		PACWEB GENERATED CONTRIBU- TION
	Receipt For:		Year-to-Date ▼	1
	Primary General		500.00	
	Other (specify) ▼		500.00	
s	UBTOTAL of Receipts This Page (optional)			4000.00
_				
T	OTAL This Period (last page this line number on	ıly)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 / 38 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Ir	nc Political	Committee (OPHTHPAC)	
<u>/</u> _	Full Name (Last, First, Middle Initial) Nicholas Kokoris			Date of Receipt
٦.	Mailing Address 7749 Painter Avenue			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 3DYSBR638200
	Whittier	CA	90602-2411	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer self	Occupation Ophthalm		Batch Tool - PAC
	Receipt For:	<u> </u>	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
3.	Full Name (Last, First, Middle Initial) Kristine Kunesh-Part			Date of Receipt
	Mailing Address 2601 Far Hills Avenue	01 03 / 9 2006		
	City	State	Zip Code	Transaction ID: 3DYPWY741692
	Dayton	ОН	45419-1634	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00 Batch Tool - PAC
	Name of Employer Self	Occupation Ophthalm	nologist	Batch 1001 - PAC
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
) .	Full Name (Last, First, Middle Initial) Bernd Kutzscher			Date of Receipt
	Mailing Address 172 32nd Avenue			01 03 7 2006
	City San Erangiaga	State CA	Zip Code 94121-1012	Transaction ID: 3DYPWY264723
	San Francisco		94121-1012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00 Batch Tool - PAC
	Name of Employer self	Occupation Ophthaln	nologist	Baltin 1001-1 AC
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
S	UBTOTAL of Receipts This Page (optional)			1050.00
T	OTAL This Period (last page this line number on	ıly)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18/38					
ITEMIZED RECEIPTS		or each category of the	(check only one)					
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17					
Any information copied from such Reports and St	atements ma	not be sold or used by any perso	on for the purpose of soliciting contributions					
or for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
American Academy of Ophthalmology	Inc Politica	Committee (OPHTHPAC)						
Full Name (Last, First, Middle Initial) A. Gregory Kwasny			Date of Receipt					
Mailing Address 2300 N Mayfair Road			M M / D D / Y Y Y Y					
Suite 1030			01 20 2006					
City	State	Zip Code	Transaction ID: CJUYIB852589					
Milwaukee	WI	53226-1505	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		500.00					
Name of Employer	Occupatio	n	Batch Tool - PAC					
self	Ophthalr	nologist						
Receipt For:	Aggregate	e Year-to-Date ▼						
Primary General Other (specify)	' '	500.00	1					
Ctrier (specify)	0 0		1					
Full Name (Last, First, Middle Initial) B. Kathy Lentz			Date of Receipt					
Mailing Address 851 E 5th Street Suite			M M / D D / Y Y Y Y					
Washington Eye Surge		7: 0 !	01 05 2006					
City	State	Zip Code	Transaction ID: 3DYSBR155077					
Washington	MO	63090-3128	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		500.00					
	1		Batch Tool - PAC					
Name of Employer self	Occupatio Ophthalr							
Receipt For:		Year-to-Date ▼						
Primary General	1.99.19		1					
Other (specify)		500.00						
Full Name (Lock First Affects 1995)								
Full Name (Last, First, Middle Initial) C. Jeffrey Levine			Date of Receipt					
Mailing Address 372 Chandler Street Courtland Yard			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State	Zip Code	Transaction ID: 3DYZZO006626					
Worcester	MA	01602-3300	Amount of Each Receipt this Period					
FEC ID number of contributing	С		365.00					
federal political committee.	0							
Name of Employer self	Occupatio		Batch Tool - PAC					
	Ophthalr							
Receipt For: Primary General	Aggregate	e Year-to-Date ▼						
Primary		365.00						
			1365.00					
SUBTOTAL of Receipts This Page (optional)		······	1303.00					
TOTAL This Period (last page this line number of	TOTAL This Period (last page this line number only)							

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 19/38
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Ar or	ny information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American Academy of Ophthalmology Ir	nc Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Jonathan Macy			Date of Receipt
	Mailing Address 8635 W 3rd Street Suite	360W		01 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 3DYSBR524778
	Los Angeles	CA	90048-6101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer	Occupation	1	Batch Tool - PAC
	self	Ophthaln		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		365.00	
3.	Full Name (Last, First, Middle Initial) Ahad Mahootchi			Date of Receipt
	Mailing Address PO Box 1059			01 23 7 2006
	City	State	Zip Code	Transaction ID: CJV32D747753
	Zephyrhills	<u>FL</u>	33539-1059	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		365.00
	Name of Employer self	Occupation		Batch Tool - PAC
	Receipt For:	Ophthaln	nologist e Year-to-Date ▼	_
	Primary General	Aggregate		
	Other (specify) ▼	0 0	365.00	
Э.	Full Name (Last, First, Middle Initial) Alfred Marrone			Date of Receipt
	Mailing Address 3440 Lomita Boulevard Suite 451			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: CJUYIB527307
	Torrance	CA	90505-4801	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
s	UBTOTAL of Receipts This Page (optional)			1230.00
_	OTAL This Desired floor	1.)		
- 1	OTAL This Period (last page this line number on	пу)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 20/38
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and Stor for commercial purposes, other than using the i	atements mag	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Academy of Ophthalmology			
Full Name (Last, First, Middle Initial) A. Gary Mason			Date of Receipt
Mailing Address 7777 Southwest Freewa Suite 934	ay State	Zip Code	0 1 1 8 2 0 0 6 2 0 0 6
City Houston	TX	77074-1802	Transaction ID: CJUW8T465723 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer self	Occupatio Ophthalr		Batch Tool - PAC
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Malcolm Mazow			Date of Receipt
Mailing Address 2855 Gramercy Street			01 / 04 / 2006
City	State	Zip Code	Transaction ID: 3DYQZU862160
Houston	TX	77025-1635	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00 Batch Tool - PAC
Name of Employer self	Occupatio Ophthalr		Daton 1001-1 AO
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Connie McCaa			Date of Receipt
Mailing Address 2500 N State Street Flo Unv MS Med Center/Mc	Bryde Buil		01 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Jackson	State MS	Zip Code 39216-4500	Transaction ID: 65323-23687380552292 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33210 4000	250.00
Name of Employer self	Occupatio Ophthalr	nologist	PAC 4th of 4
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			1250.00
TOTAL This Period (last page this line number of	only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 38 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Ir	ıc Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Read McGehee Mailing Address 400 Westhampton Static	n		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Virginia Eye Inst City Richmond	State VA	Zip Code 23226-3330	Transaction ID: 3DYSBR361438 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer self Receipt For: Primary General Other (specify) ▼	Occupation Ophthaln Aggregate		Batch Tool - PAC
3.	Full Name (Last, First, Middle Initial) Timothy McInnis Mailing Address 300 N Willson Avenue S Medical Eye Specialists I		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: 2HO3JE8LSYD36
	Bozeman FEC ID number of contributing federal political committee.	C	59715-3551	Amount of Each Receipt this Period 500.00
	Name of Employer self	Occupation Ophthaln	nologist	PACWEB GENERATED CONTRIBU- TION
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- C.	Full Name (Last, First, Middle Initial) Michael Migliori			Date of Receipt
	Mailing Address 120 Dudley Street Suite 301		7: 0.1	0 1 1 7 2 0 0 6
	City Providence	State RI	Zip Code 02905-2436	Transaction ID: EUK2DN245894 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer self Receipt For:	Occupation Ophthaln		Batch Tool - PAC
	Primary General Other (specify) ▼	Aggregate	500.00	
S	UBTOTAL of Receipts This Page (optional)	<u></u>		1500.00
T	OTAL This Period (last page this line number on	lv)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 22/38
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
•			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	ny information copied from such Reports and Stateme for commercial purposes, other than using the name	ents may and add	not be sold or used by any persoress of any political committee to	n for the purpose of soliciting contributions
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American Academy of Ophthalmology Inc F	Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Michael Morgan			Date of Receipt
	Mailing Address 1617 Steele Boulevard			01 04 7 2006
	•	State	Zip Code	Transaction ID: 3DYQZU182863
		LA	70808-1192	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	colf '	ccupation phthalm		Batch Tool - PAC
		•	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1000.00	
3.	Full Name (Last, First, Middle Initial) G. Neatrour			Date of Receipt
	Mailing Address 2676 Wimbledon Point Driv	/e		0 1
	·	State	Zip Code	Transaction ID: 3DYZZO458171
		VA	23454-1167	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	ealf '	ccupation		Batch Tool - PAC
	<u> </u>	phthalm	nologist Year-to-Date ▼	
	Receipt For: Ageneral Ageneral	iggregale		
	Other (specify) ▼	1 1	500.00	
) .	Full Name (Last, First, Middle Initial) Gregory Olson			Date of Receipt
	Mailing Address 2001 Nicole Road Deerwood Estates			01 05 2006
	•	State	Zip Code	Transaction ID: 3DYSBR534565
		IA	50501-8726	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C ;		250.00
	oolf ' '	ccupation phthalm		Batch Tool - PAC
	· · · · · · · · · · · · · · · · · · ·	•	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
s	UBTOTAL of Receipts This Page (optional)			1750.00
_				
T	OTAL This Period (last page this line number only)		•	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 23/38
	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Elba Pacheco			Date of Receipt
	Mailing Address 819 Ritchie Highway Suite 1020			0 1 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Severna Park	State MD	Zip Code 21146-4197	Transaction ID: 3DYSBR816086 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		365.00
	Name of Employer	Occupation	1	Batch Tool - PAC
	self	Ophthalm		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	0 0	365.00	
3.	Full Name (Last, First, Middle Initial) Joseph Parelman			Date of Receipt
	Mailing Address 3830 W 75th Street			01 18 7 2006
	City	State	Zip Code	Transaction ID: CJUW8T155801
	Prairie Village	KS	66208-4128	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00 Batch Tool - PAC
	Name of Employer self	Occupation Ophthalm		Batch 1001 - PAC
	Receipt For:	•	Year-to-Date V	-
	Primary General	199.192		
	Other (specify) ▼		500.00	
о. Э.	Full Name (Last, First, Middle Initial) William Phillips			Date of Receipt
	Mailing Address 3236 Spriggs Request W	ay		0 1 2 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: CJV477185818
	Mitchellville	MD	20721-2524	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00 Batch Tool - PAC
	Name of Employer self	Occupation Ophthalm	nologist	Datch 1001 - PAC
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
s	UBTOTAL of Receipts This Page (optional)			1365.00
<u> </u>	OTAL This Davied (less nose this line access to the			
1	OTAL This Period (last page this line number onl	y)	>	

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 24/38
	EMIZED RECEIPTS		or each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)		71	
\rangle	American Academy of Ophthalmology Ir	c Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Tedd Puckett			Date of Receipt
	Mailing Address 1209 Valley View Street			01 19 7 2006
	City	State	Zip Code	Transaction ID: CJUXCO121145
	Radford	VA	24141-3831	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:	· ·	Year-to-Date ▼	
	Primary General Other (specify) ▼		365.00	
3.	Full Name (Last, First, Middle Initial) Vadrevu Raju			Date of Receipt
Mailing Address 3140 Collins Ferry Road				01 09 7 2006
	City	State	Zip Code	Transaction ID: 3DYXN5076325
	Morgantown	WV	26505-3352	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:		Year-to-Date V	-
	Primary General	00 0		
	Other (specify) ▼		250.00	
) .	Full Name (Last, First, Middle Initial) Steven Rice			Date of Receipt
	Mailing Address 2055 15th St. N Suite D			01 10 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 3DYYWA644222
	Saint Cloud	MN	56303-1747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	365.00	
sı	JBTOTAL of Receipts This Page (optional)		·····	980.00
	, 33- (4)-1-3/		<u>^</u>	
T	OTAL This Period (last page this line number on	ly)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 25/38
TEMIZED RECEIPTS			or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American Academy of Ophthalmology Inc	c Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) William Rich			Date of Receipt
	Mailing Address 6231 Leesburg Pike Suite 608			0 1 1 8 2 0 0 6
	City Falls Church	State VA	Zip Code 22044-2102	Transaction ID: CJUW1T710410 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		2500.00
	Name of Employer	Occupation	1	Batch Tool - PAC
	self	Ophthaln	nologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	2500.00	
3.	Full Name (Last, First, Middle Initial) H. Richert			Date of Receipt
	Mailing Address 1750 Pine Street			01 05 7 2006
	City	State	Zip Code	Transaction ID: 3DYSBR223600
	Abilene	TX	79601-3044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00 Batch Tool - PAC
	Name of Employer self	Occupation Ophthalm		Balcii 1001 - PAC
	Receipt For:	•	Year-to-Date ▼	
	Primary General		500.00	
	Other (specify) ▼	0 0	300.00	
Э.	Full Name (Last, First, Middle Initial) Steven Rosenfeld			Date of Receipt
	Mailing Address 16201 Military Trail Delray Eye Assoc			01 03 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 3DYPWY853011
	Delray Beach	FL	33484-6503	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00 Batch Tool - PAC
	Name of Employer self	Occupation Ophthalm	nologist	Datcii 100i - PAC
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	250.00	
s	UBTOTAL of Receipts This Page (optional)			3250.00
_				
T	OTAL This Period (last page this line number only	y)	>	

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 38 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any or fo	information copied from such Reports and Stor commercial purposes, other than using the	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology	Inc Politica	I Committee (OPHTHPAC)	
A. <u>S. M.</u> C. <u>E. F. M. S. M. M. S. M. M. S. M. M. M. S. M. M.</u>	Full Name (Last, First, Middle Initial) Siv Saetre Mailing Address 4061 Treeline Drive Dity Bettendorf EC ID number of contributing ederal political committee. Name of Employer self Receipt For: Primary General Other (specify) Cotty Deerfield Deerfield EC ID number of contributing ederal political committee.	State IA C Occupation Ophthalm Aggregate State IL C Occupation	nologist e Year-to-Date ▼ 365.00 Zip Code 60015-3441	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
5	Receipt For: Primary General Other (specify)	Ophthaln		
C. <u>F</u>	Full Name (Last, First, Middle Initial) Ralph Sando Mailing Address 104 Rose Lane City Haverford EC ID number of contributing ederal political committee. Receipt For: Primary General Other (specify)	State PA C Occupation Ophthalm Aggregate		Date of Receipt M M D D 2 0 0 6 Transaction ID: 63219-30886477231979 Amount of Each Receipt this Period 250.00 PAC 3rd of 4
SU	BTOTAL of Receipts This Page (optional)			980.00
TO	TAL This Period (last page this line number o	ınlv)	b	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 38 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Statem for commercial purposes, other than using the name	nents may e and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc	Political	Committee (OPHTHPAC)	
A. 3.	Brookline FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Christianne Schoedel Mailing Address 360 Saint Charles Way City	State MA C Occupation Ophthalm Aggregate State PA		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee. Name of Employer self	C Occupation Ophthalm	1	Amount of Each Receipt this Period 625.00 Batch Tool - PAC
) .	Long Beach FEC ID number of contributing federal political committee. Name of Employer self	State CA C Occupation Ophthalm		Date of Receipt M M O D D C 2 0 0 6 Transaction ID: 3DYSBR656015 Amount of Each Receipt this Period 300.00 Batch Tool - PAC
s	UBTOTAL of Receipts This Page (optional)			2175.00
Т	OTAL This Period (last page this line number only)		>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 28/38
	EMIZED RECEIPTS		or each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American Academy of Ophthalmology Ir	nc Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Michael Steiner			Date of Receipt
	Mailing Address 16233 Sylvester Road South			01 11 2006
	City Burien	State WA	Zip Code 98166-3045	Transaction ID: 3DYZZO474022 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00.00.00	500.00
		Ossusstia		Batch Tool - PAC
	Name of Employer self	Occupation Ophthalm		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
3.	Full Name (Last, First, Middle Initial) Richard Storm			Date of Receipt
	Mailing Address 303 E Park Avenue			01 04 2006
	City	State	Zip Code	Transaction ID: 3DYQZU242858
	Long Beach	NY	11561-3600	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer self	Occupation		Batch Tool - PAC
	Receipt For:	Ophthalm Aggregate	1010gISt e Year-to-Date ▼	_
	Primary General	7.99.094.0		
	Other (specify)	0 0	365.00	
Э.	Full Name (Last, First, Middle Initial) Domenic Strazzulla			Date of Receipt
	Mailing Address 500 Congress Street Suite 1A1			01 25 2006
	City	State	Zip Code	Transaction ID: CJV5CH445243
	Quincy ECOLD acceptance of a contribution.	MA	02169-0908	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		365.00
	Name of Employer self	Occupation Ophthalm		Batch Tool - PAC
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		365.00	
s	UBTOTAL of Receipts This Page (optional)			1230.00
			·	
T	OTAL This Period (last page this line number on	ly)	>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 38 (check only one) X 11a 11b 11c 12
An or	ry information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc			
A.	colf	State NE C Occupation Ophthaln Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
3.	Jerome Swale Mailing Address 264 Fox Trail Drive City Bourbonnais FEC ID number of contributing federal political committee. Name of Employer self	State IL C Occupatio Ophthaln Aggregate		Date of Receipt M M O D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
D.	oolf '	sultants State NC C Occupation Ophthaln		Date of Receipt M
s	UBTOTAL of Receipts This Page (optional)			1000.00
T	OTAL This Period (last page this line number only	v)	.	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 30 / 38
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
Ar	ny information copied from such Reports and State	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology In	c Political	Committee (OPHTHPAC)	
۹.	Full Name (Last, First, Middle Initial) Michael Vrabec			Date of Receipt
	Mailing Address 21 Park Place Valley Eye Associates			01 09 7 2006
	City	State	Zip Code	Transaction ID: 61863-21336001157760
	Appleton	WI	54914-8872	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer self	Occupation Ophthaln		PAC 3rd of 4
	Receipt For:		Year-to-Date V	-
	Primary General Other (specify) ▼	Aggregate	250.00	
3.	Full Name (Last, First, Middle Initial) Joseph Walker			Date of Receipt
	Mailing Address 6901 International Center		01 11 2006	
	City	State	Zip Code	Transaction ID: 3DYZZO085578
	Fort Myers	<u>FL</u>	33912-7125	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer self	Occupation		Batch Tool - PAC
	Descipt For:	Ophthaln	nologist e Year-to-Date ▼	_
	Receipt For: Primary General	Aggregate	: Teal-10-Dale V	
	Other (specify) ▼		1000.00	
).	Full Name (Last, First, Middle Initial) Wilson Wallace			Date of Receipt
	Mailing Address 1701 N Federal Highway			01 / 04 / 2006
	City	State	Zip Code	Transaction ID: 3DYQZU668662
	Boca Raton	<u>FL</u>	33432-1909	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer self	Occupation Ophthaln	nologist	Batch Tool - PAC
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
s	UBTOTAL of Receipts This Page (optional)			1550.00
_	OTAL This Davied (last case this lies are the			
- 1	OTAL This Period (last page this line number onl	y)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 31 / 38 (check only one)
ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	itements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Academy of Ophthalmology I	nc Political	Committee (OPHTHPAC)	
Full Name (Last, First, Middle Initial) 4. L. Watkins			Date of Receipt
Mailing Address 427 W 20th Street Suite	100		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State	Zip Code	Transaction ID: 3DYQZU290906
Houston	TX	77008-2425	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		365.00
Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
Receipt For:	<u> </u>	e Year-to-Date ▼	7
Primary General Other (specify) ▼	0 0	365.00	
Full Name (Last, First, Middle Initial) 3. John Wells			Date of Receipt
Mailing Address 2750 Laurel Street Suite 101			01 18 / Y Y Y Y Y
City	State	Zip Code	Transaction ID: CJUW8T341622
Columbia	SC	29204-2038	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) C. Charles Wheeler			Date of Receipt
Mailing Address 387 Town Mountain Roa Suite 107	ad		01 / 05 / 4 2006
City	State	Zip Code	Transaction ID: 3DYSBR185711
Pikeville	KY	41501-1640	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		365.00
Name of Employer self	Occupation Ophthaln		Batch Tool - PAC
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	365.00	
SUBTOTAL of Receipts This Page (optional)			1730.00
TOTAL This Period (last page this line number or	nlv)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 38 (check only one) X 11a 11b 11c 12 12 13 14 15 16 17
Ang or f	y information copied from such Reports and Sta for commercial purposes, other than using the r	itements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Academy of Ophthalmology I	nc Political	Committee (OPHTHPAC)	
A. 3.	Full Name (Last, First, Middle Initial) Peter Whitted Mailing Address 4353 Dodge Street Midwest Eye Care City Omaha FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) George Wong Mailing Address 2601 N Flagler Drive Suite 302		nologist e Year-to-Date ▼ 1000.00	Date of Receipt M M M / D D D / Y Y Y Y Y 1 8 / 2 0 0 6 Transaction ID: CJUW1T547457 Amount of Each Receipt this Period 1000.00 Batch Tool - PAC Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City West Palm Beach FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State FL C Occupation Ophthaln Aggregate		Transaction ID: 3DYPWY635255 Amount of Each Receipt this Period 1000.00 Batch Tool - PAC
C.	Full Name (Last, First, Middle Initial) Lyn Yakubov Mailing Address 10 Dutton Drive Eye Care Assoc Inc City Youngstown FEC ID number of contributing federal political committee. Name of Employer self Receipt For: Primary General Other (specify)	State OH C Occupation Ophthaln Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SI	JBTOTAL of Receipts This Page (optional)			2500.00
TC	OTAL This Period (last page this line number o	nlv)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 33/38 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c Detailed Summary Page 13 14 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Harry Zink Date of Receipt Mailing Address 3519 Friendsville Road 26 2006 City State Zip Code Transaction ID: CJV6IK218166 Wooster OH 44691-1241 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Batch Tool - PAC Name of Employer self Occupation Ophthalmologist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	•	45425.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 34/38 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c Detailed Summary Page 13 14 **X** 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Ophthalmology Inc Political Committee (OPHTHPAC) Full Name (Last, First, Middle Initial) Leonard Feiss Date of Receipt Mailing Address B. P. 142 10 2006 City State Zip Code Transaction ID: 3DYYWA119541 Beaune Cedex 21204 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Batch Tool - PAC Name of Employer Self Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	500.00
TOTAL This Period (last page this line number only)	<u> </u>	500.00

Image# 26920021404

\sim							
5(CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		NUMBER:	PAGE 35/38		
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check onl	22 23	24 25 26 28c 29 30b		
	y Information copied from such Reports and State for commercial purposes, other than using the nan						
$\overline{\ }$	NAME OF COMMITTEE (In Full)						
/	American Academy of Ophthalmology Inc	Political Committee (OPHT	HPAC)				
	Full Name (Last, First, Middle Initial)			Transaction ID: 292	27460602104393466		
۹.	Union Bank	Date of Disbursement					
	Mailing Address 400 California Street			01 / 31	2006		
	City San Francisco	State Zip Code CA 94104		Amount of Each Disk	bursement this Period		
	Purpose of Disbursement Bank charges 1/06			852.54			
	Candidate Name		Category/ Type				
	Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)					
	State: District:						

SUBTOTAL of Disbursements This Page (optional)	•	852.54
TOTAL This Period (last page this line number only)	—	852.54

SCHEDULE B (FEC Form 3X)

	Use seperate schedule(s)	(check only		= NUMBER: PAGE 36/38 ly one)					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	X 23 28b	24 28c	25 29	\vdash	26 30b
Any Information copied from such Reports and Stater									
or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)	and address of any political co	אווווווננפ	te 10 80	HOIL COH(FI	DULIONS II	om such	COMMINUE	-	_
American Academy of Ophthalmology Inc	Political Committee (OPH)	THPA	C)						
Full Name (Last, First, Middle Initial)				Transa	action ID	: 033753	3060118	566057	<u></u> 75
Charles A Gonzalez Congressional Camp			f Disburs		V	V			
Mailing Address PO Box 12612				01	, ,	19 /	žoŏ	6	
City San Antonio	Amour	nt of Each	n Disburs	ement this	Period	_			
Purpose of Disbursement	Г	v	-				1000	0.00	
2006 Primary Candidate Name Gonzalez Charles		Catego Type	-						
	ement For: 2006	турс	,						
	Primary General								
State: TX District: 20	Other (specify)								
Full Name (Last, First, Middle Initial)				Transe	action ID	: 55135	1060104	594567	— 71
Congressman Joe Barton Committee, the					f Disburs	ement	1000104		•
Mailing Address PO Box 1444		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$							
City Ennis	State Zip Code TX 75120			Amour	nt of Each	n Disburs	ement this	Period	_
Purpose of Disbursement	_				1500	0.00			
2006 Primary Candidate Name		Catego	ory/						
Barton Joe		Туре	-						
9 1	ement For: 2006 Primary General								
President	Other (specify)								
State: TX District: 06									
Full Name (Last, First, Middle Initial) Cummings for Congress Campaign Comm	nittee				action ID of Disburs		4060118	565404	14
Mailing Address PO Box 1631					/ D	19	žoŏ	6 ^Y	
City Baltimore	State Zip Code MD 21203			Amour	nt of Each	n Disburs	ement this	Period	_
Purpose of Disbursement 2006 Primary							1000	0.00	
Candidate Name Cummings Elijah Category/ Type									
	ement For: 2006	- 71							
Senate X President	Primary General Other (specify) ▼								
State: MD District: 07	Ca.or (opoon))								
SUBTOTAL of Disbursements This Page (optional)			<u> </u>				3500	.00]
TOTAL This Period (last page this line number only			•						

SCHEDULE B (FEC Form 3X)

SCILEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)				NUMBER: PAGE 37/38 yone)					
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	Х	23 28b	24 28c	\vdash	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full)	e and address or any political co	ااااااااا	.166 10 8	Olicit Cort	iibuli	3115 110	iii Sucii	COMMIN	iee	
American Academy of Ophthalmology Inc	Political Committee (OPH	THP	AC)							
Full Name (Last, First, Middle Initial)				Trans	sactio	on ID:	054890	0601)4593	9235
Marsha Blackburn for Congress Inc.						sburse		v • v	V	1
Mailing Address PO Box 682185				0 ^M 1	M /	0	5 /	20	ŏ6 [°]	
City Franklin	State Zip Code TN 37068			Amou	unt of	Each	Disburse	ement t	his Pei	riod
Purpose of Disbursement	37000			1 [10	00.00	
2006 Primary										
Candidate Name Blackburn Marsha	'	Cateo Typ								
X	ment For: 2006									
Senate X President	Primary General Other (specify) ▼									
State: TN District: 07										
Full Name (Last, First, Middle Initial) Re-Elect McGovern Committee							997396	60601	18564	4511
——————————————————————————————————————					M /	sburse		Y Y	Y Y	1
Mailing Address PO Box 60405						01 M / D D D / Y Y Y O O O O				
City Worcester	State Zip Code MA 01606			Amou	unt of	Each	Disburse	ement t	his Pei	riod
Purpose of Disbursement 2006 Primary		0	•	T L.				10	00.00	
Candidate Name McGovern James		Cate								
	ment For: 2006	Тур	Эе	-						
Senate	Primary General									
State: MA District: 03	Other (specify)									
Full Name (Last, First, Middle Initial) - Roskam for Congress Committee						on ID: sburse	085744	10601	18563	8880
					M /		9 /	Y Y	ŏ 6 °	1
Mailing Address 141 Shelley Lane										1
City Wheaton	State Zip Code IL 60187			Amou	unt of	Each	Disburse	ement t	his Pei	riod
Purpose of Disbursement 2006 Primary					0			10	00.00	
Candidate Name Roskam Peter	-	Cate								
-	ment For: 2006	- ,,		1						
Senate X President	Primary General Other (specify) ▼									
State: IL District: 06	(-p->)/ \									
SUBTOTAL of Disbursements This Page (optional)			>					30	00.00	
TOTAL This Period (last page this line number only)						•		650	00.00	
. C					-					

Image# 26920021407								
Form/Schedule: F3XA Transaction ID:	This amended report corrects Line 17, Other Federal Receipts.							